

**Testimony on SB 1015 Authorizing the Medical Use of Marijuana
To the Judiciary Committee
By Lisa Berthiaume, CT Elks Association, State DAP Chairman
Delivered by Robert Ferone, CT Elks Association, State Government Relations Chairman**

Chairman Eric Coleman, Chairman Gerald Fox, Ranking Member John Kissel, Ranking Member John Hetherington and other distinguished Members of the Judiciary Committee:

Thank you for allowing me the opportunity to testify on this important issue. My name is Lisa Berthiaume and I am the State Drug Awareness Program Chairman for the Connecticut Elks Association, representing 21,000 members in our state.

The Elks Drug Awareness Program is the largest volunteer drug awareness program in the United States. We are very proud of our dedicated army of volunteers who freely give their time and talents to this most noble cause. The Elks are committed to eliminating the use and abuse of illegal drugs by all members of society and believe that in order to ensure a bright future for our country, it is essential that our children be raised in a drug-free environment.

We are very concerned and believe that SB 1015, a bill that seeks to legalize marijuana under the guise of medicine, will have substantial negative impacts on the state of Connecticut.

What kind of message will the passage of such bills send to the youth of Connecticut? Years of marijuana prevention and education will be undermined. States that have legalized marijuana under the guise of medicine continue to rank in the top ten for states with the highest marijuana use in the 12 and older age category. Do not allow Connecticut to fall victim to the same fate!

How would employers maintain a drug-free workplace? Proponents of such legislation claim that its passage would not allow an individual to be intoxicated while on the job, but how will intoxication be determined? No "impairment" level has ever been established and, therefore, drug tests detect the "presence" of drugs; not "impairment." Studies, however, indicate the impairment caused by marijuana use can persist as long as 24 hours - even though the user may no longer be aware they are still impaired. Therefore, observation of employees may not determine potentially unsafe employees which would be detected through drug testing.

SB 1015 ignores the fact that marijuana is an illegal drug not approved as medicine by the Food and Drug Administration (FDA), and its use is, therefore, unregulated. This has significant implications for patient care since there are too many health risks associated with such use. Studies on crude marijuana do not exist that can be used to establish the quantity of dose, frequency and duration of administration, route or method of administration of marijuana for any medical condition, and smoking has never been a safe, acceptable method of administering medicine.

SB 1015 could increase drugged driving incidents. It will be impossible to determine through drug testing if an individual smoked marijuana before getting behind the wheel or the night before. According to a study conducted by the University of Auckland, regular cannabis users were 9.5 times more likely to be involved in automobile accidents.

Finally, one needs to ask who will really be smoking marijuana under the guise of medicine. Proponents of "medical" marijuana want you to believe that only those with debilitating medical conditions who have unsuccessfully sought out other effective, approved treatment will qualify

for "medical" marijuana. This is not true! One only needs to look at the numbers from other states that have passed such legislation to see how widely the programs are being abused.

- ✓ Voters in the state of Oregon approved a "medical" marijuana act in 1998. As of January 1, 2011, the program has 38,269 individuals that legally hold "medical" marijuana ID cards, and of those, 90% are treating "severe pain" (an indefinable term that is being used to cover medical conditions such as menstrual cramps, headaches, and minor arthritis) rather than the more serious conditions such as cancer (4%), glaucoma (1%), and HIV+/AIDS (2%).
- ✓ Even more alarming are the numbers from California. In cities like San Diego where the issue has been closely examined, only 2% of those smoking as "medicine" have serious conditions such as AIDS, glaucoma and cancer. A full 98% are "treating" more minor conditions such as back and neck pain, anxiety, muscle spasms, insomnia, headaches, and other less significant conditions. Even more troubling is that 12% of the users are under 21!

I hope that you will consider these findings and that you will REJECT SB 1015.

With Respect,

Lisa Berthiaume
CT Elks Association
State DAP Chairman